PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004									Application or Docket Number			
		CLAIMS A	PART (	(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY			
U.S. NATIONAL STAGE FEES						<u> </u>	]	RATE	FEE	1	RATE	FEE
BASIC FEE			SMALL ENT. = \$ 150		LAR	GE ENT. = \$ 300	1	BASIC FEE	150	OR	BASIC FEE	
EXAMINATION FEE			Satisfies PCT-Article 33(1)- (4) = \$50 / \$ 100			ther situations = 100 / \$ 200	1	EXAM. FEE	1 11	ļ	EXAM. FEE	
SEARCH FEE			U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400			ther situations = \$250 / \$500		SEARCH FEE	20		SEARCH FEE	
FEE FOR EXTRA SPEC. PGS.			minus 100 =			/ 50 =		X \$ 125 =	1		X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			minus 20 =		•			X \$ 25 =		OR	X \$ 50 =	
INDEPENDENT CLAIMS			m	inus 3 =	*			X \$ 100 =		OR	X \$ 200 =	
MUL	TIPLE DEPEN	DENT CLAIM PRI	SENT				1	+ \$ 180 =		OR	+ \$ 360 =	
* If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL								TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY					
AMENDMENT A	,	CLAIMS REMAINING AFTER AMENDMENT	HIGH NUM PREVIC PAID		BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
	Total	*	Minus .	**		=		X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=		X \$ 100 =	-	OR.	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
ę								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colun		(Column 3)						<del></del>
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X \$ 25 =	**.	OR	X \$ 50 =	
	Independent	•	Minus	***		= /		X \$ 100 =		OR	X \$ 200 =	
'	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
	_		·····					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
**	If the "Highest Nu	ımn 1 is less than the ımber Previously Pal ımber Previously Pal	d For" IN THIS SP	ACE is less	than '2	0', enter "20".				,		÷ ,
		imber Previously Paid nber Previously Paid					in th	e appropriate box	in column 1.		•	